

Foster Family Home - Corrective Action Report

Provider ID: 1-150079

Home Name: Zeny Agonoy, CNA

94-447 Kahualena Street

Waipahu HI 96797

Review ID: 1-150079-9

Reviewer: Maribel Nakamine

Begin Date: 10/15/2020

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

CCFFH inspection for a 3 person CCFFH recertification completed.

Corrective Action Report issued during CCFFH inspection with all items due to CTA within 30 days.

6.(d)(1)- see applicable sections of the review

Foster Family Home Background Checks [11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- CG#2's APS/CAN/Fingerprinting lapsed on 5/2/19 and no renewal/results seen in CCFFH binder. HHM#1 without results of APS/CAN/Fingerprinting seen in CCFFH binder.

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5)- HHM#1 without evidence of confidentiality policies and procedures and client privacy rights training.

Foster Family Home Personnel and Staffing [11-800-41]

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(f)(1)- HHM#1 was without result of current TB clearance in CCFFH binder.

Foster Family Home Physical Environment [11-800-49]

49.(a)(1) Bathrooms with non-slip surfaces in the tubs and or showers, and toilets adjacent or easily accessible to sleeping rooms;

49.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;

Comment:

49.(a)(1), (2)- No non-slip bath mat/rug seen in clients' shower. No grab bars near the toilet for clients to hold on to for safety.

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Foster Family Home

Quality Assurance

[11-800-50]

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

50.(e)- No doorbell seen in front doors; CTA unable to knock on metal screen door; no sound when CTA attempted.

Foster Family Home

Client Rights

[11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Client #2, Client #3, and clients' bathroom doors were without locks from the inside. Under the My Choice, My Way- clients should be able to lock door for privacy.

Foster Family Home

Records

[11-800-54]

54.(a)(1) Emergency procedures and an evacuation map;


54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(a)(1)- CCFFH had no Evacuation Map.

54.(c)(6)- Client #1, Client #2, and Client #3's progress notes in charts were without signatures on each dated entries.


Compliance Manager


Primary Care Giver

10/15/20
Date

10/15/2020
Date

CTA RN Compliance Manager:

MARIBEL NAKAMINE

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate:

ZENY AGONROY

(PLEASE PRINT)

CCFFH Address:

94-447 KAHUALENA ST. WAIPAHU, HAWAII 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.(a) (1)	HHM#1 obtained APS/CAN on 11/19/20. HHM#1 was not able to complete this right away because he don't reside in my house full time due to school and work. Most of the time he live with his grandparents house. CG#2 obtained the updated APS/CAN/Fingerprint result on 10/20/20.	11/19/20 20	Need to update documents at least 3 months before the expiration date.
16.(b) (5)	Confidentiality policies and procedure and client privacy rights training has been signed and updated.	10/20/20 20	Need to check binder at least 2 times a month for ensure all documents are up to date. Documents is mandatory for all SCG to update training and signed yearly as part of binder check 2 times a month.
49.(a) (1), (2)	Missing grab bar has been installed and non slip mat/ rug has been placed on the shower floor.	10/30/20 20	Foster home building requirements will be reviewed and check quarterly and go to

☒ All items that were fixed are attached to this CAP

PCG's Signature:

Zeny Agonroy

Date: 11/29/2020

☒ CTA has reviewed all corrected items

CTA RN Compliance Manager: MARIBEL NAKAMINE

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate: ZENY AGONoy

(PLEASE PRINT)

CCFFH Address: 94-447 KAHUALENA ST. WAIPAHU HI. 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
50.(e)	Doorbell have been installed on the front door	10/20/2020	CTA website for in case of any changes /new Requirements . Going forward, quarterly review and check CTA website to see if there is any new Requirements for foster homes.
53.(b) (9)	Client #2 , client#3 bathroom doors has been replaced with locks for privacy.	10/20/2020	Going forward, quarterly review and check CTA website to see if there is any new Requirements for foster homes.
54.(a) (1)	Evacuation Map has been updated	10/30/2020	Evacuation Map map must be updated in the event of moving to different address and or upgrading homes.
54.(c) (6)	Noted on signing progress note on each dated note entries	10/15/2020	Quarterly read and review rules and regulation on the CTA website for compliance.

☒ All items that were fixed are attached to this CAP

PCG's Signature: Zeny Agony

Date: 11/28/2020

☒ CTA has reviewed all corrected items